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Bib Data Sheet

CONFIRMATION NO. 8411

|                                    |  |                     |                               |   |
|------------------------------------|--|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>10/776,035 | <b>FILING OR 371(c) DATE</b><br>02/09/2004<br><b>RULE</b> 1.47 | <b>CLASS</b><br>427 | <b>GROUP ART UNIT</b><br>1711 | <b>ATTORNEY DOCKET NO.</b><br>1001-13 RES |
|------------------------------------|--|---------------------|-------------------------------|---|

**APPLICANTS**

Carl J. Pacifico, West Milford, NJ;  
 Wen-Hsin Wu, Bothell, WA;  
 Marta Fraley, Parksville, NY;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 09/996,636 11/29/2001 which is a REI of 09/469,368 12/22/1999 PAT 6,251,478

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 06/01/2004

|   |   |                               |                       |                           |                                |
|---|---|-------------------------------|-----------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | <b>STATE OR COUNTRY</b><br>NJ | <b>SHEETS DRAWING</b> | <b>TOTAL CLAIMS</b><br>28 | <b>INDEPENDENT CLAIMS</b><br>4 |
| Verified and Acknowledged                                   | <i>Wen-Hsin Wu</i><br>Examiner's Signature Initials   |                               |                       |                           |                                |

**ADDRESS**

23869

**TITLE**

Sensitive substance encapsulation

|                                   |   |   |
|-----------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>651 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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| <b>TITLE</b><br>Sensitive substance encapsulation  |   |                               |   |   |                                |
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